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## I-BIDS Handoff Tool

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<b>I-BIDS Handoff Tool®</b>	
<b>I- (Identification/Information)</b>	Personnel giving information will properly identify self (role/rank), location, and will provide a brief introduction of patient's condition (reason for transfer, chief complaint [core problem])
<b>B- Background (Situation)</b>	Patient demographics (age, allergies, blood type, code status), nature of injury, mental status, assistive devices (ventilatory support, oxygen, vascular access lines [ABC], restraints, chest tubes), overall assessment by systems, and medications, IV fluids, and blood administered (Route/Time given [Zulu])
<b>I -Illness Severity</b>	Vital signs (BP, P, R, SpO2, T, Pain Level/location), description of injuries by location and magnitude (level of urgency and priorities) following a cephalo-caudal approach, abnormal labs (if available)
<b>D-Duties</b>	What has been done-what needs to be done (plan) for each particular deficit-address duty by system/ severity of injury, plan for needs with timing prioritization, introduce contingency plan
<b>S-Synthesis</b>	Receiver restate information and duties, anticipate needs & changes, states plan and contingency plan, specific orders/instructions

<b>I-BIDS Handoff Tool®</b>	
<b>I- (Identification/Information)</b>	This is [name, role, rank] from [sending facility] reporting to [receiving facility], presenting a [age, gender, injured patient] in [critical, non-critical] condition resulting from [nature of injury], needing transfer for [reason for transfer] and presenting [chief complaint {core problem}]
<b>B- Background (Situation)</b>	This is a [age, gender] patient with [NKDA/allergies], blood type [A, B, AB, O, Rh {positive/negative}], code status [known/DNR], with injuries resulted from [nature of injury], [mental status], [assistive devices (ventilatory support, oxygen, vascular access lines {ABC}, restraints, chest tubes)], presenting [overall assessment by systems- Neurological, Respiratory, Cardiac, GI/GU, MSK, Integumentary] and receiving/received [medications, IV fluids, and blood quantitatively] specifying route/time given (Zulu)
<b>I -Illness Severity</b>	Vital signs are [BP, P, R, SpO2, T, Pain level/location], present detailed description of injuries [by location and magnitude (level of urgency and priorities) following a cephalo-caudal approach], and abnormal labs values of [(if available)]
<b>D-Duties</b>	What has been done [timed (Zulu) detailed interventions for each injury and overall management of patient] -the plan is [what needs to be done for each particular deficit (injury) addressing duty by system/ severity of injury (prioritizing) {plan for needs with timing prioritization}], and introduce contingency plan [for failing measures/outcomes]
<b>S-Synthesis</b>	Receiver will restate information [This is a {age, gender} patient with {NKDA/allergies}, blood type {A, B, AB, O, Rh (positive/negative)}, code status (known/DNR), with injuries resulted from {nature of injury}, {mental status}, {assistive devices (ventilatory support, oxygen, vascular access lines (ABC), restraints, chest tubes)}, presenting {overall assessment by systems- Neurological, Respiratory, Cardiac, GI/GU, MSK, Integumentary} and receiving/received {medications, IV fluids, and blood quantitatively}] specifying route/time given (Zulu) and duties [What has been done {timed (Zulu) detailed interventions for each injury and overall management of patient} -the plan is (what needs to be done for each particular deficit (injury) addressing duty by system/ severity of injury (prioritizing) {plan for needs with timing prioritization}], and introduce contingency plan [for failing measures/outcomes], anticipate needs & changes, states plan and contingency plan, specific orders/instructions